IL-1040-X (R-12/01)

		p 1	Amended Individual Income Tax Return or fise: Provide the following information type your current name(s), address, and Social Security number(s).	cal year en	ding ,	<u> </u>	REV 09
•	_	our first name and initial Spouse's first name (and last name if different) Your last name			Your Social Security number		
	Ma	lailing address			Spouse's Social Security number		
		State ZIP tt Only check the box if your name(s), address, or Social Security number(s) are different from your previously filed return. Complete Step 4 on back.			4 Check the box that identifies why you are making		
	Cit					this change and complete Step 3 on back. Federally accepted on Month Day Year NOL accepted on Month Day Year State change	
			2: Complete the following information bers below will not necessarily match line numbers on your original return.		column A ecent figures filed	Colu	mn B
	Income	2	Adjusted gross income or loss (Attach copy of U.S. 1040 or 1040X.) Federally tax-exempt interest and dividend income Other additions (Specify) Total income. Add Linco 1 through 2	1 2		1 2 3	
r	suo	5 6	Total income — Add Lines 1 through 3. Federally taxed Social Security and federally taxed retirement plans Military pay included in Line 1. Illinois Income Tax refund from U.S. 1040, Line 10	6	l	4 5 6 7	
ere.	Subtractions	8 9 10	U.S. Treasury bonds, bills, notes, U.S. agency interest U.S. 1040, Schedule B Other subtractions (Specify) Total subtractions — Add Lines 5 through 9.	8) 8	l l11	8 9 10	
forms h	2		Subtract Line 10 from Line 4. This is your base income. Number of exemptions: a yourself and your dependents	a		l1 a	
& 1099–R forms here.	Net Income		b 65 years of age or older or legally blind Residents: Write your exemption allowance from Form IL-1040, Line 12. Nonresidents and part-year residents: Go to Line 14.	b 12		b 12	I
-2G,	Ĭ		Net income: Subtract Column B, Line 12, from Line 11.			13	
	Tax and Contributions	15	Tax – Include recapture amount from Schedule 4255 if applicable. Residents: Multiply Line 13 by the applicable rate. (See instructions.) Nonresidents and part-year residents: Write the correct Illinois base income from Schedule NR, Step 5, Line 45, here. Write the correct tax amount from Line 51. (Attach corrected Schedule NR.) Total amount of your previous overpayments and original contributions. Add Column B, Lines 14 and 15.	14	1	14 15 16	l
			Illinois Income Tax withheld (See instructions.)	17		I7	
	lits	19	Estimated payments (IL-1040-ES, IL-505-I, and prior year credit) Credit from Schedule CR (Attach corrected Illinois Schedule CR.) Property tax credit – Complete the PT Worksheet in the instructions.	18 19		18 19	_
ment.	Payments and Credits		Write Line 3 amount here → 20a and Line 8 on 20b. Education expense credit – Complete Schedule ED or ED Worksheet. Write Line 1 amount here → 21a and Line 10 on 21b.	20)b	l
er on your pay	Payme	23 24	Earned Income Credit – Complete the EIC Worksheet in the instructions. Write Line 1 amount here 22a and Lines 9 or 12 on 22b. Tax credits from attached corrected Schedule 1299-C Other payments excluding penalty and interest. (See instructions.)	22 23		2b 23 24	l
Security number on your payment.	ance Due	26 27	Total payments and credits — Add Column B, Lines 17 through 24. If Line 16 is less than Line 25, subtract Line 16 from Line 25. This is your If Line 16 is greater than Line 25, subtract Line 25 from Line 16. This is your Penalty and interest (See instructions.)		2 e. 2	25 26 27 	l l
Social	Bal	29	Add Lines 27 and 28. This is your total balance due. enalties of perjury, I state that I have examined this return and, to the best of my know	st amount		29	icial Use
Attach remittance Include your Socia	S	igr ere	Your signature Date Daytime phone number	Spouse's sigr		On	noial USC

Name	Social Security no	Fo	r tax year/						
Step 3: Everyone filing this return must complete the following information									
30 Regarding the tax year you are amending, o Form IL-1040-X, electronically filed return, o		st recent Illinois Form IL-1040,							
31 Did you file a U.S. Form 1040X? If you did file a U.S. Form 1040X, you must a your U.S. Form 1040X, and	attach to this form a copy of		☐ yes ☐ no						
the notification you received from the Intershown on your U.S. Form 1040X; e.g., a reyou must write the date the IRS notified your Step 1, Line 4. Failure to provide this day.	efund check, "Statement of Accou ou (not the date you filed your U.S	unt," agreement, or judgment. S. 1040X) in the appropriate space	e						
Do not file this form if you have not received your U.S. Form 1040X. This form is not due a Refer to "How long do I have to correct or an	and cannot be processed until yo	ur federal return has become fina	l.						
32 Are you filing this form because of a federal If " yes ," be sure to write the date of finalizat of all federal audit reports. Failure to provide	tion in the appropriate space in S		☐ yes ☐ no						
33 Have you received notification that your return	rn is under audit by the Illinois De	epartment of Revenue?	yes no						
34 Explain, in detail, the reason(s) for filing this	34 Explain, in detail, the reason(s) for filing this amended return. Attach a separate sheet if necessary.								
Step 4: Complete only if your nam	 ne(s). address. or Socia	I Security number(s) on	this return are						
different than on your previously		•							
35									
First name	Last name	Your Social Security	number _						
Spouse's first name	Last name	Spouse's Social Sec	curity number						
Prior mailing address		only your name, add	Do not file Form IL-1040-X if you are changing only your name, address, or Social Security						
City	State ZIP	number. Instead, for address provided in	ward this information to the the instructions.						
Step 5: Complete only if you are changing your filing status or residency									
36 Filing Status: Single or head of household	d Married filing jointly	Married filing separately	Widowed						
37 Residency: Resident *Complete and attach Schedule NR.	☐ Nonresident*	Part-year resident*							
	tlined by the Illinois Income Tax Act. Disclosure of penalty. This form has been approved by the Form	f this information is REQUIRED. Failure to provide as Management Center. IL-492-0074	्र						